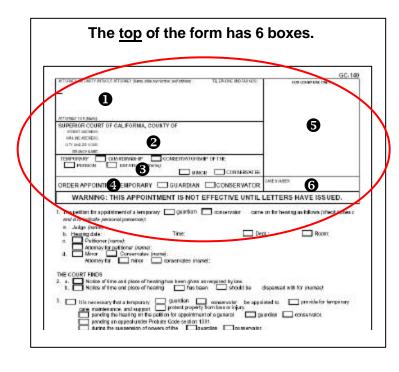


FORM GC-140 INSTRUCTIONS

ORDER APPOINTING TEMPORARY GUARDIAN OR CONSERVATOR (GC-140)

Tips for completing Court forms, Click here

Filling out the Caption on your form



Fill out the caption boxes as follows:

- "Attorney or Party without Attorney" if you are not represented by an attorney, fill in your name, address, and telephone number.
 - "Attorney For (Name)" write "In Pro Per" (which means that you are representing yourself).
- <u>"SUPERIOR COURT OF CALIFORNIA, COUNTY OF"</u> write the name of the County where you are filing your case. Click here for location of courts.
- Check the box "<u>Guardianship</u>" and either "<u>Person</u>" or "<u>Estate</u>" write in the full name of the <u>minor</u> (child) Check the box "Minor".
- Check the box "Guardian".
- **6** "For Court Use Only" Leave blank
- **6** "Case Number" Write in the case number.

Order Appointing <u>Temporary Guardian</u> or <u>Conservator</u>

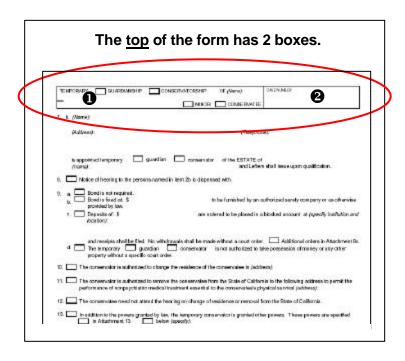
Do not sign this form.

The judge will sign this form if he or she approves the temporary guardianship.

- 1. Check the box for "guardian."
 - a. Leave blank.
 - **b.** Write "Ex parte" next to "hearing date."
 - **c.** Check the box for "petitioner" and write your name.
 - **d.** Leave blank.
- **2. a.** Leave blank.
 - **b.** Leave blank.

- **3.** Check the following boxes:
 - i) 1st box "It is necessary...",
 - ii) 2nd box "guardian",
 - iii) 4th box "provide for temporary",
 - iv) 6th box "pending the hearing...", and
 - v) 7th box "guardian".
- Leave blank.
- **5.** Leave blank.
- **6.** Leave blank.

At the top of page 2, GC-140



Fill out the caption boxes as follows:

- "Check the box "Guardianship" and write in the child's full name. Check the "minor" box.
- **2** "Case Number" Write in the case number.

- 7. a. Write your name and the address and telephone number where you live now. Check the "guardian" box after "is appointed temporary" and write the child's name, or the names of all the children if there is more than one child.
 - **b.** Leave blank.
- 8. Leave blank.

- **9.** a. Check if guardian of person only.
 - **b.** Leave blank.
 - c. Leave blank.
 - d. Leave blank.
- **10.** Leave blank.
- 11. Leave blank.
- **12.** Leave blank.
- **13.** Leave blank.
- **14.** Leave blank.
- **15.** Leave blank.
- **16.** Leave blank.
- 17. Leave blank.